



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 24 2017

Mr. Stephen Bruce,
Executive Director
Devereux Foundation Inc.
139 Leopard Road
Berwyn, Pennsylvania 19312

RE: Devereux PA Adult Services PCH – Hillcrest Cottage
229 Leopard Road
Berwyn, Pennsylvania 19312
License #: 198140

Dear Mr. Bruce:

As a result of the Department of Human Services' annual licensing inspection on December 14, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 19814 - 12/14/2016 - Rosenblat, Dale
 PCH Name: DEVEREUX PA ADULT SERVICES PCH HILLCREST COTTAGE

1. **REGULATION 55 Pa.Code §2800**
 2800.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. **DESCRIPTION OF VIOLATION**
 On 12/14/2016, the home's current licensing inspection summary issued by the Department, was not posted in a conspicuous and public place in the home.

3. **PLAN OF CORRECTION (POC)** (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

After the 2016 inspection, the licensing inspection summary issued by the Department for the previous year (2015) for Hillcrest was immediately posted on the bulletin board in the hallway of the program. Also, the program supervisor posted the current (2016) licensing inspection summary issued by Department on the bulletin board in the hallway of the program.

Administrator or designee will monitor postings on a weekly basis to ensure information is able to be viewed at all times. *BE*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley, Director of Quality Management* Date *01/15/2017*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 1-30-17
 (Date)

Plan of correction implementation status as of 1-30-17
 (Date)

The above plan of correction was approved by *BE*
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 19814 - 12/14/2016 - Rosenblat, Dale
 PCH Name: DEVEREUX PA ADULT SERVICES PCH HILLCREST COTTAGE

1. REGULATION 55 Pa. Code §2600
 2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:
 (1) Resident rights.
 (2) Emergency medical plan.
 (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
 (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION

Direct care staff persons A and B completed their 40th scheduled work hour on 3/8/16 and 7/7/16 respectively. The staff persons did not complete an orientation in mandatory reporting of abuse and neglect under the Older Adult Protective Services Act.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Supervisor completed trainings for staff A and staff B immediately after the 2016 annual inspection. As required by Department regulations, the supervisor will train new and current staff in mandatory reporting of abuse and neglect under the Older Adult Protective Service Act within 40 scheduled working hours.

The home's Training Plan will include all required trainings. Training needs will be discussed at the home's Quality Management reviews. - *DE*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley, Director of Quality Management* Date *01/18/2017*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 1-30-17
 (Date)

Plan of correction implementation status as of 1-30-17
 (Date)

- Fully implemented
- Partially implemented - Adequate Progress
- Partially implemented - Inadequate Progress
- Not implemented

The above plan of correction was approved by *DE*
 (Initials)